

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

*naintenance fee notification	ns.							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) , 21005 7590 09/29/2005					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
•		W 2C IOKV	,					
HAMILTON, BROOK, SMITH & REYNOLDS P.O I P					I hereby certify that t	this Fee(s) Transmittal is be	ing deposited with the United	
530 VIRGINIA ROAD P.O. BOX 9133					States Postal Service	with sufficient postage for	first class mail in an envelope	
7.03./2008 NFERBUR 100000402 091331169		(DE	(B DEC 3 0 2005 ES)		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. [Ellen T. Spear (Depositor's name)]			
FC:1501 1400.00 OP		(1)		Ψ/	8 11 2			
FC:1504	300.00 OP	THE PENET OF THE		グー	12/28/200		(Date)	
FC:8001	45.00 OP				12/20/,200			
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		IVEN.	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/851,169 05/09/2001 TITLE OF INVENTION: CALCULATING APPARATUS HAVING			Terence Neil Thomas			-47-17-US 2037.2024-000	2520	
		,						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400			\$300	\$1700	12/29/2005	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS]		
CHEN, ALAN S		2182			713-400000	_		
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list "Hamilton, Brog							ton, Brook, & Reynolds, PC	
							& Reynolds, PC	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alte		· a			
			registered attorney or agent) and the names of up to					
								3. ASSIGNEE NAME ANI
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear T a substitute for	on th	ne patent. If an assig g an assignment.	mee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
MOSAID Technologies, Inc. Kanata, Ontario, Canada								
							D a	
				_	Individual - (A)	orporation or other private	group entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): (X) A short in the control of the short in the short					amount of the fee(s) is enclosed.			
					· ·			
Publication Fee (No small entity discount permitted) Advance Order - # of Copies 15 The Director is hereby authorized by charge the required fee(s), or credit any over the property of the						iciency		
Advance Order - # of Copies 15 XI The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-0380 (enclose an extra copy of this form).								
	s (from status indicated above						GDD 1.05()/0)	
• •	SMALL ENTITY status. See				<u> </u>	ALL ENTITY status. See 37		
NOTE: The Issue Fee and I	o is requested to apply the Issu Publication Fee (if required) veords of the United States Pate	vill not be accepted	d from anyone of	or to the the	re-apply any previous an the applicant; a re	sly paid issue fee to the application gistered attorney or agent; or	the assignee or other party in	
Authorized Signature	(d)				Date	2/28/5		
Typed or printed name James M. Smith Registration No. 26,043								
This collection of information	ion is required by 37 CFR 1.3	11. The information	on is required to o	btain	or retain a benefit by	the public which is to file (and by the USPTO to process)	
an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virginia and Confidential Con	lity is governed by 35 U.S.C. application form to the USPT is for reducing this burden, sliginia 22313-1450. DO NOT	O. Time will vary	depending upon Chief Informati	tion is the i	s estimated to take 12 ndividual case. Any of fficer 11 S. Patent and	minutes to complete, inclu- comments on the amount of d Trademark Office, U.S. D	ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450,	
Alexandria, Virginia 22313 Under the Paperwork Redu	3-1450. action Act of 1995, no persons	are required to res	spond to a collect	ion o	f information unless i	t displays a valid OMB cont	rol number.	